DEPARTMENT OF HEALTH AND FAMILY SERVICES Division of Disability and Elder Services Printed 07/28/2006

Provider Inspection Summary

For the period 06/01/2003 to 05/31/2006 Community Based Residential Facility CLASS CNA (NONAMBULATORY) STATE OF WISCONSIN
Bureau of Quality Assurance
P.O. Box 2969
Madison WI 53701-2969

Facility Information

Facility Name: DEERVIEW MEADOWS ASSISTED LIVING (0011358)

Address: 844 SOUTH OLSON STREET, SHAWANO, WI 54166

License Status: PROBATIONARY

Licensed/Certified/Registered 03/01/2006

Regional Office: NORTHERN REGION (RHINELANDER), (715) 365-2800

Survey History

No survey activity during the period 06/01/2003 through 05/31/2006.

Disclaimer: This information is provided as a public service by the Wisconsin Department of Health and Family Services (DHFS). The Department neither endorses any facility nor guarantees that this information is accurate, up-to-date, or complete. This information, which should not be used as a sole source in selecting a facility, does not replace official information sources.